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ABSTRACT

This set of quality standards for Colorado's early child care and education programs is intended to help these programs move toward quality services for all young children. It includes self-evaluation checklists designed to help programs document the state standards they have achieved, the standards they are seeking to meet, and the resources needed to meet the standards in the following areas: (1) interactions among staff and children; (2) curriculum; (3) staff-parent interaction; (4) staff qualifications and development; (5) administration; (6) staffing; (7) physical environment; (8) health and safety; (9) nutrition and food services; and (10) evaluation. The goals and rationale are outlined for each of the 10 areas. Programs using the draft standards and checklists will provide feedback to the Colorado Department of Education, and the standards will be revised accordingly and adopted in final form. (SM)



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Developmentally Appropriate Practice, Birth - 8 and Accreditation Criteria and Procedures of the National Academy of Early ACKNOWLEDGMENT: This document is based on the National Association for the Education of Young Children (NAEYC) Colorado's young children and families. We gratefully acknowledge NAEYC's encouragement in the development of these Childhood Programs. The material has been edited, adapted, and expanded to address the values and priorities of standards.

The Colorado Department of Education would like to acknowledge the following people for their hard work and input into these Quality Standards for Early Childhood Care and Education Services.

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INTRODUCTION

Quality Standards for Early Childhood Care and Education Services reflects the values of parents, educators, administrators, and policy-makers across the state who are striving for the best possible education and care for our young children. While considerable input has been obtained in drafting this document, additional input will be sought during a "field-test" period.

This is not a final product. Instead, it is a working document that will guide early childhood care and education programs in their movement toward quality services for all young children. It will be revised and improved based on feedback from parents and from those working with young children.

How the Quality Standards were Developed

The Quality Standards were developed during a process that spanned more than two years.

During 1990 representatives of several preschool programs within the Colorado Department of Education (CDE) met together to discuss early childhood program collaboration. These programs included Chapter 1, that has been funding preschool services in Colorado since 1965, the Colorado Preschool Program, first established by the Colorado state legislature in 1988, Special Education, that has had federal funding for preschool services since 1976 and Migrant Education. Discussions among representatives of these programs led to the development of the Position Paper for Collaborative Preschool Services which was adopted by the State Board of Education on August 8, 1991 and which reflects the Department's commitment to establishing consistent expectations and quality across all early childhood programs.

In January of 1991, the Colorado General Assembly mandated that school districts provide special education services for all eligible three- and four-year olds. Responding to that mandate, CDE organized a two-day, working retreat in July of that year. The retreat brought together people from a wide range of perspectives to brainstorm what "best practices" should be for preschool special education programs. The retreat included parents, private providers and directors of special education. Representatives were also present from the Colorado Department of Health, the Colorado Department of Social Services (CDSS) the Colorado Department of Institutions, and Had Start. There were representatives of Chapter 1 Programs, the Colorado Program, Special Education, and the Migrant Education Program.

The Colorado State Board of Education Position statement adopted in August of 1991 guides CDE's continuing initiative for collaborative preschool services. This statement was one of the important foundations on which the Quality Standards were built. The statement recognizes the crucial importance of partnerships between early childhood programs and families, supports a quality learning environment for the total child, and encourages the effective and efficient use of public and private resources to meet children's needs.

The statement's emphasis on collaboration led CDE to form an Early Childhood Management Team made up of representatives from all of the early childhood programs within the Department. This included persons from the Colorado Preschool Program, Evenstart, Chapter 1 Program, Special Education Program, Migrant Education Program, and the Child Care Block Grant.



professional development. The section of these standards that addresses staff qualifications and staff development will reflect findings and recommendations of the Task Force.

Use of the Quality Standards

The Quality Standards document is intended to be a tool to assist programs working toward quality services. They include a self-evaluation checklist to help programs document those standards that they have achieved, those they are seeking to meet, and the resources needed to meet the standards. The checklist will also provide information to CDE regarding training and technical assistance needs. The Standards will also be used by CDE as a monitoring instrument for all early childhood programs; programs will be expected to demonstrate that they are using the document for program development and staff development planning.

The Need for Community Feedback

The best thoughts and ideas of many individuals and agencies have resulted in this draft of the *Quality Standards*. As noted previously, this is a working document that must be tested. It is essential that feedback be received from parents, service providers and administrators across the state if the standards are to be relevant and useful for all programs.

CDE and CDSS need the help of parents and of child care and education professionals. We need you to tell us:

- What works about these standards -- and what doesn't?
 - What is clear -- or confusing?
- What is overly complicated -- or has been omitted?
 - What has helped your program?
- What would make the Standards even more helpful?

A Plea for Community Collaboration

The time is past when any program or agency can operate in isolation. Mounting social problems and lack of resources make it essential that the people of Colorado restructure programs to make them as productive as possible. In addition, it is becoming increasingly clear that for an early childhood care or education program to be effective, strong family and community involvement are essential.

Restructuring programs, however, may not be easy, for there is a long history of competition among providers. Sharon Lynn Kagen, writing in *The Care and Education of America's Young Children: Obstacles and Opportunities*, described the numerous separate children's programs that have been developed with little recognition of the whole. "It is akin to strengthening an umbrella by randomly adding spokes, but lacks the fabric of coordination," she says.

Kagen notes, however, that changes in both theoretic and practical paradigms have shifted, and these offer hope that the profession can move from well-intentioned piecemeal programs to high-quality, comprehensive services. New commitments to serve the whole child in the context of the family and the community, she writes, require that sarvices and policies be integrated.

CDE, CDS, and many others seeking to restructure Colorado's early childhood systems share Kagen's vision for programs that offer comprehensive services for all children no matter how those services are funded. In particular, CDE and CDSS have worked together and with parents, administrators, providers and other state programs to develop these (vality Standards. The process has modeled the kind of collaboration, interagency and interdisciplinary effort we hope communities will undertake to make the best use of their local resources and talents. It is essential that everyone involved work together to achieve the best possible care and education for the families and young children of Colorado.



In 1992, the state legislature reauthorized the Colorado Preschool Program, removed the "pilot" status of the Program and included provisions to require that the program adopt nationally recognized standards and to insure that funded sites meet the licensure requirements of the Colorado Department of Social Services (CDSS). In addition, one of the goals of the Colorado 2000 initiative states that all children in Colorado begin school ready to learn, and that children receive early services that support this goal.

In response to these policy decisions, CDE and CDSS launched a collaborative initiative to ensure that all early childhood care and education programs funded by CDE meet a consistent set of standards.

The joint CDE/CDSS initiative states that all CDE-funded early childhood programs will:

- be licensed by CDSS
- meet criteria established in the Quality Standards for Early Childhood Care and Education Services
 - Association for the Education of Young Children (NAEYC) or other nationally recognized accrediting organizations.

The initiative further states that training, technical assistance, and financial incentives will be provided to local education agencies to help them meet these three objectives.

The timeline for action that has been adopted by CDE and CDSS is as follows:

- During the 1992-93 school year, all funded sites will apply for licensing from CDSS.
 - CDSS will review all applications and grant licenses by August 1, 1993.
- Programs using the draft Quality Standards will provide feedback to CDE during the first half of 1993.

- The Quality Standards will be revised based on this feedback and adopted in final form by the State Board of Education by September of 1993.
- By the year 2000, all school districts and community sites receiving CDE funding for preschool services will meet the Quality Standards, and all sites that choose will have received nationally recognized accreditation.

In March of 1992, the Statewide Preschool Advisory Council was established, which includes parents, advocates, service providers and administrators working in early childhood programs across the state and state level policy makers. One of the first tasks of the Council was to review the Quality Standards to ensure that the persons most directly affected by the Quality Standards were actively involved in their development.

A task force of this advisory council and the Management Team from CDE merged the "best practices" for early childhood special education programs and the highly respected standards developed by the National Association for the Education of Young Children (NAEYC). The process has resulted in additions to the NAEYC standards in two important areas. One is a greatly increased emphasis on a family-centered approach to early childhood care and education. The second is increased emphasis on community collaboration and coordination in the use of resources.

In September of 1992, a statewide teleconference was held that involved CDE and CDSS staff, the State Board of Education, the Office of the Governor and local service providers. A panel discussion about licensing requirements and the *Quality Standards* was held followed by a period of questions and answers via telephone linkages with the teleconference observation sites.

CDE and CDSS will continue to work closely with the Governor's Early Childhood Professional Standards Task Force as they work on a proposal for a system of early childhood

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Interactions among Staff and Children Curriculum

Staff-Parent Interaction

Staff Qualifications and Development

Administration

Staffing

Physical Environment Health and Safety YHUNHHUNH-

Nutrition and Food Service

Evaluation



A. Interactions among Staff and Children

GOAL: Interactions between children and staff provide opportunities for children to develop and understanding of self and others and are characterized by warmth, personal respect, individuality, positive support, and responsiveness. Staff facilitate interactions among children to provide opportunities for development of self-esteem, social competence, and intellectual growth.

RATIONALE: All areas of young children's development – social, emotional, cognitive, and physical – are integrated. Optimal development in all areas derives from positive, supportive, individualized relationships with adults. Young children also develop socially, emotionally, and intellectually through peer interaction.

- Staff interact nonverbally by smiling, touching, holding.
 Staff talk with individual children during routines (arriving/ departing, eating, and other activities.
 Staff respectfully provide privacy in matters of personal hygiene and care.
 Staff give children adequate time to
- A-2. Staff are responsive to children.

respond

Staff quickly comfort infants in distress.
Staff reassure crying toddlers and listen to children with attention and respect.
Staff respond to children's questions and

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native language
 other forms of non-verbal language

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	Staff demonstrate the ability to effectively communicate with all children.	
	communication among all children.	
A-4a.	Staff treat children of all races, religions, cultures, and abilities equally, with respect and consideration.	
	☐ Staff integrate activities related to ethnicity, religion, and culture on a daily basis, not just on holidays or special occasions.	
A-4b.	Staff provide children of both sexes with equal opportunities to take part in all activities.	
A-4c.	Staff provide equal educational opportunities for children from families who are homeless and families who are migrant and seasonal workers.	

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A. Interactions among Staff and Children	Continued	A-5. Staff encourage independence in children through appropriate age and developmental choices.	For example:	Infants: finger-feeding self. Toddlers: washing hands, selecting own toys. Threes and fours: dressing, picking "p toys. Fives: setting table, cleaning, acquiring self-help skills. School-agers: performing responsible jobs, participating in community activities.	A-6a. Staff use positive approaches to help	children behave constructively. Guidance methods include	☐ Redirection.☐ Planning ahead to revent	Positive reinforcement and encouragement.	☐ Consistent, clear rules explained to children.	☐ Natural, logical, and fair consequences.

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Continued A-10. Staff expectations of children's social behavior are developmentally

For example:

appropriate.

Two pieces of the same equipment are available so toddlers are not forced to share too often. Preschoolers are encouraged to cooperate in small

groups. School-agers have opportunities to participate in

A-11. Children are encouraged to talk about feelings and ideas instead of solving problems with force.

For example:

Adults supply appropriate words for infants and toddlers to help them learn ways to get along in a group.

Adults discuss alternative solutions with children two years and older.

A-12. Staff provide a variety of opportunities, assistance, and modeling to encourage child-to-child interaction.

For example:

Adults teach children to use alternative communication methods with peers.

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B. Curriculun

GOAL: The curriculum encourages children to be actively involved in the learning process, to experience a variety of developmentally appropriate activities and materials, and to pursue their own interests in the context of life in the community and the world.

RATIONALE: The curriculum is not just the goals of the program and the planned activities but also the daily schedule, the availability and use of materials, transitions between activities, and the way in which routine tasks of living are implemented. Criteria for curriculum implementation reflect environment and concrete experiences that contribute to concept development.

B-1a. The program has a long-range, written curriculum plan that reflects the program's philosophy and goals for children.

B-1b. All aspects of the curriculum are responsive to family, community, cultural, and personal diversity.

B-2. Staff plan learning activities for children based on assessment of individual needs and interests.

☐ Each child has an individualized learning plan developed by a collaborative team. ☐ The individualized learning plan addresses priorities applicable to the child's total day across settings, such as home, neighborhood school, community preschool, child care center, or other community setting.

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•	B. Curriculum Continued	Continued	 □ The collaborative team includes teaching staff, family members, specialists, and/or others requested by the family or program. □ A program-specific individualized learning plan is completed for each child (Special Education, Head Start, Colorado Preschool Program, Chapter 1). 	When necessary, modifications are made in the environment, schedule, and activities to meet a child's special needs.	For example:	Indoor and outdoor environments are accessible to children with special needs, including ramps, bathroom, and playground access as needed. Schedule is modified as needed, such as shorter day or alternative activities. Program is modified as needed, such as provision of special materials and equipment, use of supportive services, individualization of activity.	☐ Families are provided an array of options for services and supports.
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culum Continued		The daily schedule provides a balance of activities on the following dimensions:	B-4a. Indoor/outdoor	B-4b. Quiet/active	B-4c. Individual/small group/large group	B-4d. Large muscle/small muscle	B-4e. Child-initiated/staff-initiated	Multiracial, nonsexist, nonstereotyping pictures, dolls, books, and materials are used.
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	Consumable learning materials such as macaroni, whipping cream, pudding, and other cooking ingredients are used.							
B-5e.	Developmentally appropriate materials and equipment are available for school-agers.							
	 Active play equipment and materials such as bats and balls for organized games. Construction materials for woodworking, blocks. Materials for hobby and art projects, 						 	
	science projects. Materials for dramatics, cooking. Books, records, musical instruments. Board and card games.							
B-6.	The program uses media, such as television, films, and videotapes as follows:					·		
	 Viewing is limited to developmentally appropriate programming that has been previewed by adults prior to use. Another option for activity is always 						+	
	available. ☐ No child is required to view the program. ☐ Staff discuss what is viewed with children to develop critical viewing skills.							
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Staff provide a variety of developmentally children to achieve the following goals: (Rate each goal separately considering the appropriate, hands-on activities for examples related to the age group being observed.) B-7.

Staff foster positive self-concept in children. B-7a.

For example:

Hold, pat, and touch babies for comfort and Infants/younger toddlers stimulation.

Play mirror games, label facial features and body Imitate each baby's actions and sounds. Falk and sing to babies.

Encourage and support each baby's developmental Allow infants to feed themselves when ready. achievements such as pulling up self.

Older toddlers/preschoolers

Allow time for children to talk about what they see,

Use children's names frequently in songs, games. Encourage children to draw pictures, tell stories Display children's work and photos of children. about self and family.

School-agers

Provide opportunities to express growing independence/self-reliance such as the ability to Allow opportunities to work or play alone. make choices, initiate own activities.

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B. Curriculum Continued

B-7b. Staff help children develop social skills.

For example:

Infants/younger toddlers

Hold, pat, and touch babies.

Talk to, sing to, and play with each baby on a one-to-one basis.

Respond to and expand on cues coming from child.

Interpret younger toddlers' actions to other children to help them get along in the group ("Mary had it first.")

Older toddlers/preschoolers

Assist toddlers in social interaction.
Create space and time for small groups of children to build blocks together or enjoy dramatic play.

Provide opportunities for sharing, caring, and helping, such as making cards for a sick child or caring for pets.

School-agers

Arranged planned and spontaneous activities in team sports, group games, interest clubs, board and card games. Allow time to sit and talk with friend or adult.

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B-7c. Staff encourage children to thinl

c. Staff encourage children to think, reason, question, and experiment.

For example:

Infants/younger toddlers

Provide a stimulating, safe environment for infants and toddlers to explore and manipulate. Provide pictures, mobiles, brightly colored objects for babies to look at, reach for, and grasp. Play naming and hiding games such as

peek-a-boo, pat-a-cake. Provide rattles, squeak toys, other noise-making objects for babies to hear.

Move or carry around noncrawling infants so they can see different things and people.

Older toddlers/preschoolers

Plan activities for labeling, classifying, sorting objects by shape, color, size.

Discuss daily and weekly routines in terms of time concepts, season of the year.

Observe natural events such as seeds growing, life cycle of pets.

Create opportunities to use numbers, counting

Take walks around building or neighborhood. Plan trips to provide new learning experiences for preschoolers.

Encourage water and sand play.

School-agers

Provide activities such as cooking, money-making projects, gardening, science experiments, trips in the community, interacting with visitors, multicultural experiences, computer projects.

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Staff encourage children's language development. B-7d.

For example:

Infants/younger toddlers

Look at simple books and pictures. Talk to, sing to, and play with babies throughout the day. Label objects and events.

Use action rhymes.

Encourage imitation by repeating child's gestures and attempts at words.

Play verbal games, have informal conversations. Respond to sounds infant makes.

Older toddlers/preschoolers

Read books, tell stories about experiences, talk about pictures.

Provide time for conversation, ask questions that require more than one-word answers. Answer children's questions.

Use flannel board, puppets, songs, finger

School-agers

Write and produce plays, publish newspapers, Provide opportunities to read books.

Use audio-visual equipment such as tape recorders. Share experiences with friends or adults. write stories and poetry

Label things in room, use written words with Add more information to what child says. pictures and spoken language.

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The program enhances children's physical development. B-7e.

For example:

Infants/younger toddlers

Provide low sturdy furniture for child to pull up Provide open carpeted space for crawling. self or hold on to while walking.

Provide outdoor activities for infants.

Provide objects for infants to reach for and grasp. Allow mobile infants to move about freely, play with and explore the environment.

Older toddlers/preschoolers

Provide time and space for active play such as jumping, running, balancing, climbing, riding tricycles.

Provide creative movement activity using obstacle course or activity songs and records.

popbeads, pegboards, and puzzles for toddlers; add Provide fine-motor activities such as stacking rings, lacing cards and woodworking for preschoolers.

School-agers

Encourage participation in group games, individual Provide opportunities for physical exercise, use variety of outdoor equipment.

sewing, macrame, pottery, leatherwork, carpentry. Provide fine-motor activities and hobbies such as and team sports.

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B. Curriculum Continued

Staff encourage and demonstrate sound health, safety, and nutritional practices. B-7f.

For example:

All ages

Cook and serve a variety of nutritious foods. Discuss good nutrition.

hands, brushing teeth, getting regular exercise Provide activities to develop safety awareness Encourage health practices such as washing in the center, home, and community. and enough rest.

Staff talk about visiting doctor, dentist.

Staff encourage creative expression and appreciation for the arts. B-7g.

For example:

Infants/younger toddlers

Encourage scribbling with crayons.

Use music, records.

Sing to baby.

Older toddlers/preschoolers

Do creative art activities such as brush painting, drawing, collage, and playdough.

Provide time and space for dancing, movement activities, creative dramatics.

Do musical activities such as singing, listening to records, playing instruments.

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	School-agers Provide planned and spontaneous activities in arts and crafts such and mural and easel painting, ceramics, carpentry, weaving. Encourage dancing, creative dramatics, record playing, singing, playing instruments.			
B-7ħ.	Staff encourage respect for cultural diversity.			
	For example:			
	All ages Cook and serve foods from various cultures. Celebrate holidays of various cultures. Read books, show pictures of various cultures. Invite parents and other visitors to share arts, crafts, music, dress, and stories of various cultures. Take trips to museums, cultural resources of community.			
B-8.	Staff provide time for children to select their own activities and materials during the day.			
	 Infants and toddlers have some materials for free choice. Several alternative activities are available for preschooler's choice. 			

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	 Staff respect the child's right not to participate in some activities. Teachers pick up on activities that children start or interests that children show. School-agers help prepare materials, plan and choose their own activities most of the time. 								
B-9a.	Staff conduct smooth and unregimented transitions between activities.		-				-		
	 □ Children are given advanced notice of transitions ahead of time. □ Children are not always required to move as a group from one activity to another. □ To avoid waiting, the new activity is prepared before the fransition from the completed activity. □ School-age children help plan and participate in the change of activity, have time to adjust to change from school to after school setting. 							 	

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Transition is a child- and family-centered process that takes place when children move from one program or setting to another. B-9B.

knowledgeable and in which they ☐ There is a formal transition policy about which staff and parents are actively participate. Staff are flexible enough to change planned or routine activities. B-10.

For example:

Staff follow needs or interests of the children. Staff adjust to changes in weather or other unexpected situations in a relaxed way without upsetting children.

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	Routine tasks such as diapering, toileting, eating, dressing, and sleeping are handled in a relaxed and individual manner.	Routine tasks are used as opportunities for pleasant conversation and playful interaction to bring about children's learning.	☐ Self-help skills are encouraged as children are readv.	☐ Routines are tailored to children's needs and rhythms as much as possible.	 Staff respectfully provide privacy in matters of personal hygiene and care.
	B-11.				

possible. Staff respectfully provide privacy matters of personal hygiene and o

are early risers, providing school-agers with a place to rest if they choose, respecting school-agers' increasing interest in alternatives for preschoolers who Respecting infants' individual sleeping schedules, providing personal grooming. For example:

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C. Staff-Parent Interaction

GOAL: Parents are well informed about the program and are welcomed as observers and contributors to it.

RATIONALE: Young children are integrally connected to their families. Programs cannot adequately meet the needs of children unless they also recognize the importance of the child's family and develop strategies to work effectively with families. All communication between programs and families should be based on the concept that parents are and should be the principle influence in their children's lives.

C-1a. Information about the program is given to new and prospective families.

☐ Information for parents is provided in lay terms, in the family's native language, and through a variety of communication methods.	A process is used to inform families about helpful resources such as parent grouns. But line mumbers	
		A variety of formats are utilized to inform families about these resources (i.e., handbooks, videos).
	-	Written information is provided for parents about such topics as individualized learning plans, parent and child rights, resources and transitions.

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	C. Staff-Parent Interaction Continued		☐ Options are presented for services through public providers such as the School District, Head Start, Health Department.	☐ Information is provided about privately funded services such as Community Child Care, Health Services.	☐ Families with children with special needs are presented with options for the staffing such as time, place, person's to be invited.	childhood program compliment and reinforce each other.	☐ Classroom techniques are demonstrated for parents to use at home.	 Staff listen to parents and utilize information about positive strategies that work at home. 	☐ There is a formal process for a ame-school communication (e.g., newsletters, back-and-forth books)
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program. (e.g., pre-enrollment visit, parent orientation meeting, gradual introduction of children to the center). A family-centered process is used for orienting children and parents to the C-5

influences, to minimize potential conflicts and childrearing practices, including cultural Staff and parents communicate about confusion for children. C-3.

Information provided to parents about child development is consistent with established parameters of childhood growth and development. individual child differences in attaining those parameters are acknowledged and supported.

Parents are welcome at all times. (e.g., to observe, eat lunch with a child, or volunteer in the classroom) C-4a.

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	. Parents and other family members are encouraged to be involved partners in the program in various ways.	Each family defines how they will participate.The program accepts and values the different levels of participation.	 There are a variety of opportunities to encourage family participation. Staff is recentive to parents as advocates. 	for their child. Staff and families work together to develop communication and advocacy skills.		. The program has an active advisory council.	☐ Parents are members of the advisory council.	LJ Parents are involved at all levels on the council, including significant decision-making procedures.
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C. Staff-Parent Interaction Continued

The program has developed a system	to document and maintain an ongoing	communication process such as home	isits, telephone calls, written	communication.
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☐ Caregivers and parents talk regularly	about a child's physical or emotional	state.	Conferences are held at least once a y	and at other times, as needed, to disc	children's progress, accomplishments	and difficulties at home and in the

program.

Parents are informed about the program through regular newsletters, bulletin boards, frequent notes, telephone calls, and other similar measures.

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D. Staff Qualifications and Development

development and who recognize and provide for children's needs. GOAL: The program is staffed by adults who understand child

and/or early childhood education is related to positive outcomes for development of pro-social behaviors, and improved language and Research has found that staff training in childhood development RATIONALE: The quality of the staff is the most important determinant of the quality of an early childhood program. children such as increased social interaction with adults, cognitive development.

early childhood care and education professionals regardless of setting or funding source (public school, private center, family child care homes, Staff qualifications need to be consistent for head start, etc.)

Children (Section A), Curriculum (Section B) working with children as exemplified in the trained in Early Childhood Education/Child The program is staffed by individuals who are 18 years of age or older, who have been Development, and who demonstrate the criteria for Interactions among Staff and appropriate personal characteristics for and Program Specific Part IV.

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D. Staff Qualifications and Development Continued

required will vary depending on the level of Staff working with school-age children have been trained in early childhood, elementary education, child development, recreation, or professional responsibility of the position. a related field. The amount of training D-1b.

Childhood Education/Child Development. Credential or an associate degree in Early Staff who are in charge of a group of children should have at least a CDA D-1c.

both individualized and program-wide, has the specified qualifications, a training plan appropriate to the age group with which the been developed and is being implemented In cases where staff members do not meet for those staff members. The training is staff member is working D-1d.

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D. Staff Qualifications and Development Continued Volunteers should be 16 years of age or older, children under supervision of qualified staff members. (See figure on D-3 for a suggested receive orientation, and only work with staffing structure that differentiates qualifications and responsibilities. D-1e.

Teaching assistants play a valuable role in the education of young children. D-1f.

Teaching assistants and volunteers carry out services designed and supervised by appropriately qualified staff. D-1g.

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Sample Differential Staffing Structure for Educational Personnel with Suggested Educational Qualifications

Staff Role	Relevant Master's	Relevant Bachelor's	Relevant Associate's	CDA Credential	Some training	No training
DIRECTOR/ ADMINISTRATOR	V	Degree and 3 years experience				
MASTER " EDUCATOR (MASTERS, DOCTORATE)	•	Degree and 3 years experience				
EDUCATOR LEVEL II	•					
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services. Individuals fulfilling these roles should possess the knowledge and qualifications required to fulfill their responsibilities This figure does not include speciality roles such as educational coordinator, social services director, or other providers of special effectively.

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taff Qualifications and Development Continued

D-2.

support to prekindergarten and kindergarten graduate degree in EDE/CD. This individual An early childhood specialist is employed to public schools, the individual who provides specialist are a baccalaureate degree in Early may or may not be the chief administrative Childhood Education/Child Development program development is a qualified early administrative officer has training and/or experience with young children and/or a and at least 3 years of full-time teaching program administration, such as human resource and financial management. In experience relevant to early childhood teachers and/or who is responsible for direct the educational program. The qualifications of an early childhood officer of the program. The chief childhood specialist. New staff are adequately oriented about the goals and philosophy of the program, emergency health and safety procedures, special needs of children assigned to the staff member's care, how to handle discipline and behavior in the program, and planned daily activities of the program.

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Staff Qualifications and Development
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D-4a. The program provides regular training opportunities for staff to improve skills in working with children and families.

Staff take part in regular training and professional development.

☐ The training includes workshops and seminars, visits to other programs, resource materials, in-service sessions, course work.

D-4b. Training addresses the following areas: health and safety, child growth and development, developmentally appropriate practices, guidance and discipline techniques, linkages with community services, communication and relations with families, cultural and individual diversity, detecting and reporting child abuse and neglect, and other areas as needed.

D-5. Accurate and current records are kept of staff qualifications, including transcripts, certificates, or other documentation of continuing in-service education.

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GOAL: The program is efficiently and effectively administered with attention to the needs and desires of children, parents, and staff.

RATIONALE: The way in which a program is administered will affect all the interactions within the program. Effective administration creates an environment that facilitates the provision of good quality care for children. Effective administration includes good communication among all involved persons, positive community relations, fiscal stability and accountability, and attention to the needs and working conditions of staff members.

- E-1. At least annually, the director, staff, and consumers of the program conduct an assessment to identify strengths and weaknesses of the program and to set program goals for the year.
- E-2. The center has written policies and procedures for operating, including hours, fees, illness, holidays, and refund information.
- E-3. The center has written personnel policies including job descriptions, recruitment, compensation, benefits, resignation and termination, grievance procedures, and rules of a drug-free workplace.

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E-5. Records are kept on the program and related operations such as attendance of staff and children, health, confidential personnel files, and board meetings and minutes.

E-6. The following policies are in place regarding governance.

☐ When the program is governed by a board of directors, the program has written policies defining roles and responsibilities of board members and staff.

Board members and other administrators such as School Principals, CEOs, and Directors are informed about the elements and methods involved in implementing a high quality, developmentally appropriate program.

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ERIC	II() I Administration Continued		E-7. The following policies are in place regarding fiscal records.	☐ Fiscal records are kept with evidence of long-range budgeting and sound financial planning.	 Operating budgets are prepared annually and there is a quarterly reconciliation of expenses to budget. 	☐ An annual process is in place to review the budget.	E-8a. The following policies are in place regarding insurance.	☐ Accident protection and liability insurance coverage is maintained for children and adults.	☐ Vehicle insurance is maintained on any vehicle owned or leased by the facility and used to transport children.

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E. Administration Continued

E-8b. When determining whether transportation is provided for an individual child, the program considers the following:

☐ Proximity of the program and services to the child's home. ☐ Means by which other children in the

☐ Means by which other children in the program get to and from the program as services.

Ability of the family to transport their child, including the benefit of regular a on-going communication between fami and staff that occurs when families transport their own children.

Possibilities for walking, carpooling, or other typical alternatives.
 Special transportation for nonambulatory

children.

The eligibility requirements of special transportation services.

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All children are transported by licensed drivers in insured vehicles. E-8d.

determine a consistent place for the child to The program provides maximum flexibility reasonable distance of where services are be picked up and dropped off, including elsewhere, if the location is within a for parents by permitting parents to the child's home, a sitter's home, or being provided. E-8e.

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Groups that make up the community have	been clearly defined, including all	families in the program, peers in school,	administrators, teachers, support staff,	and other agencies personnel involved	with the child and family.
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E-9b.	Community and interagency participation has been defined as an active involvement in an early childhood program by a broad range of individuals, businesses, and organizations in ways that are meaningful and relevant to the lives of children and their families, and which enhance the
	children's learning.

J The program is responsive to the needs	of the community.	J The program has explored the values,	special interests, and diversity of the	
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	is familiar with and makes appropriate use	of community resources including: social	services; mental and physical health	agencies; and educational programs such as	museums, libraries, and neighborhood	centers.
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E-10b. Staff plan and consult together.

E-10c. Regular staff meetings are held for staff to consult on program planning, plan for individual children, and discuss working conditions (these may be meetings of small groups or full staff).

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	E-10d. Staff are provided with paid planning and program meeting time.
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1. Staff are provided with space and time	away from children during the day.	(When staff work directly with children	for more than four hours, they are	provided breaks of at least 15 minutes in	asch fourthour neriod)
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each four-hour period.)	The following policies are in place regarding confidentiality of information.
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☐ Staff keep information about children, families, and associates confidential. ☐ Staff refrain from commenting about children or families in the presence of

THE YEAR SOAL FOR THE YEAR THE YE						
E. Administration Continued	Staff are provided with paid planning and program meeting time.	The program acknowledges that teaching assistants play a valuable role in the education of young children.	☐ Teaching assistants and volunteers carry out services designed and supervised by appropriately certified staff.	Staff are provided with space and time away from children during the day. (When staff work directly with children for more than four hours, they are provided breaks of at least 15 minutes in each four-hour period.)	The following policies are in place regarding confidentiality of information.	☐ Staff keep information about children, families, and associates confidential.
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		The program has policies and procedures in place to deal with emergency situations.	In the event of the director's absence, an appropriate person on-site is designated to assume authority and to take action in an emergency.	The program has a formal child-centered policy regarding transitions for children entering and leaving the program, including the following elements:	 □ Timelines. □ Release time for staff to participate in transition planning and activities. □ Definition of roles and responsibilities of all those involved in the transitions. □ Interagency coordination and cooperation. □ Release of records with parent permission and in a timely manner. □ Current and appropriate assessments from other providers and settings if available. □ A written health care plan for children with special health needs.
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The program encourages the receiving program to:	 ☐ Involve the receiving teacher. ☐ Orient the child and family to the new setting in a supportive way and in the 	family's native language. Adapt the environment as needed to help the child to learn.
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F. Staff

GOAL: The program is sufficiently staffed to meet the needs of and promote the physical, social, emotional, and cognitive development of children.

RATIONALE: An important determinant of the quality of a program is the way in which it is staffed. Well-organized staffing patterns facilitates individualized care. Research strongly suggests that smaller group sizes and larger ratios of staff to children are related to such positive outcomes for children as increased interaction among adults and children, and less aggression and more cooperation among children.

The number of children in a group is limited to facilitate adult-child interaction and constructive activity among children. Groups of children may be age-determined or multi-age and include children with a variety of needs.

F-1.

☐ There is a maximum of 15 children in the classroom with a ratio of one teacher and at least one teacher assistant per class.

There are a maximum of 3 children with special needs in the classroom. However, there may be fewer children with special needs depending upon the severity of the children's needs, the qualifications and experience of the staff, and the support services available.

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F. Staffing Continued

F-2a. Sufficient staff with primary responsibility for working with children are available to provide frequent personal contact, meaningful learning activities and supervision, and to offer immediate care as needed.

F-2b. Substitutes are provided to maintain staff-child ratios when regular staff are absent.

F-3a. Each staff member has primary responsibility for and develops a deeper attachment to an identified group of children.

F-3b. Every attempt is made to have continuity of adults who work with children, particularly infants and toddlers.

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F. Staffing Continued

F-3c. Infants and toddlers spend the majority of the time interacting with the same adult each day.

A majority of the child's day is spent in activities utilizing recommended staff-child ratios and group size limitations while minimizing the number of transitions or regroupings children experience.

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G. Physical Environment

GOAL: The indoor and outdoor physical environment fosters optimal growth and development through opportunities for exploration and learning.

RATIONALE: The physical environment affects the behavior and development of the people, both children and adults, who live and work in it. The quality of the physical space and materials provided affects the level of involvement of the children and the quality of interaction between adults and children. The amount, arrangement, and use of space, both indoors and outdoors, are to be evaluated.

There is enough usable space indoors so children are not crowded.
G-1a.

G-1b. There is enough usable space for outdoo play for each age group.

For example:

Age groups use different areas or are scheduled a different times.

G-1C. When necessary, physical space has been modified to meet the needs of individual children (reference to ADA and Section 504).

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G. Physical Environment Continued	Space is arranged to accommodate children individually, in small groups, and in a large group.	 □ There are clear pathways for children to move from one area to another without disturbing activities. □ Areas are organized for easy supervision by staff. 	Space is arranged to facilitate a variety of activities for each age group.	 □ Non-walkers are provided with open space for crawling and protected space for play. □ Toddlers and preschoolers have space arranged for a variety of individual and small group activities including block building, dramatic play, art, music, science, math, manipulatives, and quiet book reading. □ Sand and water play and woodworking are available on regular occasions. □ School-agers are provided with separate space for their program, including both active and quiet 	activities.
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TECHNICAL EVAL STRENGTH IN FLACE STATUS THE YEAR COAL FOR Materials are organized consistently on and equipment are available for children Extra materials are available to staff so A variety of age-appropriate materials and equipment is provided to avoid ☐ There is a place to hang clothing for Individual space is provided for each problems with sharing or waiting. Materials are durable and in good ☐ A sufficient quantity of materials S. Physical Environment Continued low, open shelves to encourage staff can add variety and usual independent use by children. indoors and outdoors. child's belongings. each child. activities. repair. G-5. **G4**.

work alone or with a friend are available clothing and other belongings such as Private areas where children can play or Book corners, lofts, tunnels, or playhouses that There are places for sorting extra art work to be taken home. are easy for adults to supervise. indoors and outdoors.

For example:

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Continued Continued		The environment includes soft elements.	For example: Rugs, cushions, rocking chairs, soft furniture, soft toys, and adults who cuddle children in their laps.	Sound-absorbing materials such as ceiling tile and rugs are used to cut down noise.	A variety of activities can go on outdoors throughout the year. The outdoor area has a:	 □ Balance of shade and sun. □ Variety of surfaces such as hardtop for wheel toys, grass for rolling, sand and soil for digging 	Variety of age-appropriate equipment for riding, climbing, balancing, individual playing.	The outdoor play area is protected from access to streets and other dangers.
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H. Health and Safety

GOAL: The health and safety of children and adults are protected and enhanced.

RATIONALE: The provision of a safe and healthy environment is essential. No amount of good curriculum planning or positive adult-child interaction can compensate for an environment that is dangerous for children. Good quality early childhood programs act to prevent illness and accidents, are prepared to deal with emergencies should they occur, and also educate children concerning safe and healthy practices.

There is a demonstrated commitment to preventative, health-promoting practices in the program, and such practices are shared with or role-modeled for parents and children.

H-1. The program presents valid certification that it is in compliance with all legal requirements for protection of the health and safety of children in group settings, such as sanitation, water quality, and fire protection. The program is licensed or accredited by the appropriate local/state agencies (make sure social services references ADA requirements).

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H. Health and Safety Continued

H-3. A current, written record is maintained for each child, including the results of a complete health evaluation by an approved health care resource within 6 months prior to enrollment, record of immunization, any current medications, emergency contact information, names of people authorized to call for the child, and pertinent health history (such as allergies or chronic conditions). Children have received the necessary immunizations as recommended for their age group by the American Academy of Pediatrics.

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H. Health and Safety Continued

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H-4. The program has a written policy specifying limitations on attendance of sick children and staff. Provision is made for the notification of parents, the comfort of ill children, and the protection of well children.

H-5. Provisions are made for safe arrival and departure of all children which also allows for parent-staff interaction. A system exists for ensuring that children are released only to authorized people. A procedure for accountability when a child fails to show for the program is in place and followed. A system exists to ensure the safety of children whose parents have agreed to allow their older school-age children to leave the program on their own. The system includes written agreements between parents and the program and consistent sign-out procedures for released children.

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H. Health and Safety Continued

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maintained. When children with disabilities If transportation is provided for children by program presents certification that vehicles the program, vehicles are equipped with age-appropriate restraint devices. The appropriately licensed, inspected, and appropriate for the level of disability. are transported, restraints should be used in transporting children are H-6.

Children are under adult supervision at all times. H-7.

For example:

School-agers may not be in sight, but staff know Preschoolers are supervised by sight and sound. Infants and toddlers are never left unattended. where children are and what they are doing.

- accidents are recorded and reported to staff Staff are alert to the health status of each child. Individual health concerns and and parents. H-8.
- reporting suspected incidents of child abuse H-9a. Staff know and follow procedures for and/or neglect.

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Suspected incidents of child abuse and/or are reported to appropriate local agencies. neglect by parents, staff, or other persons H-9b.

certification in emergency pediatric first-a techniques (CPR) for infants and children, treatment, cardiopulmonary resuscitation and emergency management of choking from a licensed health professional or certified program is always present. At least one staff member who has H-10.

H-11a. Adequate first-aid supplies are readily available. H-11b. A plan exists for dealing with medical emergencies. Children are dressed appropriately for active play indoors and outdoors. H-12.

Protective clothing such as smocks and Extra clothing is kept on hand. mittens is kept on hand.

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H-13a. As children use the facility, staff and children keep areas reasonably clean.	
☐ Tables are washed and floors are swept after meals.	
☐ Toys are picked up after use.	
H-13b. Toileting and diapering areas are sanitary.	
☐ Soiled diapers are disposed of or held for laundry in closed containers out of reach	
☐ The cover of the changing table is disinfected or disposed after each use.	
☐ The toilet area is sanitized daily or as needed during the day.	

Staff wash their hands with soap and v before feeding, preparing, or serving for and after diapering or assisting childre with toileting or nose wiping. H-14a.

cleaned at least daily (e.g., door knobs, Surfaces touched by children are tables, countertops). H-14b.

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	H-14c. A sink with running hot and cold water is very close to diapering and toileting areas.
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H-15a. The building, play yard, and all equipment are maintained in safe, clean condition and in good repair.

☐ There are no sharp edges, splinters, protruding or rusty nails, or missing parts.

H-15b. Infants' and toddlers' toys are large enough to prevent swallowing or choking.

H-16a. Individual bedding is washed once a week and used by only one child between washings. Individual cribs, cots, or mats are washed if soiled.

H-16b. Sides of infants' cribs are in a locked position when cribs are occupied.

H-17a. Toilets, drinking water, and handwashing facilities are easily accessible to children.

For example:

Facilities are either child-sized or made accessible by nonslip stools.

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H. Health and Safety Continued

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H-17b. Soap and disposable towels are provided.

H-17c. Children wash hands after to ileting and before meals.

H-18a. Areas used by children are well-lighted and ventilated and kept at a comfortable temperature.

H-18b. Electrical outlets are covered with protective caps. (NA for rooms used by school-agers only.)

H-18c. Floor coverings are attached to the floor or backed with nonslip materials.

H-19a. Cushioning materials such as mats, wood chips, or sand are used under climbing equipment, slides, and swings.

H-19b. Climbing equipment, swings, and large pieces of furniture are securely anchored.

For example:

Permanent equipment outdoors, tall storage shelves indoors.

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H. Health and Safety Continued

H-20. All chemicals and potentially dangerous products such as medicines or cleaning supplies are stored in original, labeled containers in locked cabinets inaccessible to children.

H-21. Staff are familiar with primary and secondary evacuation routes and practice evacuation procedures monthly with children.

H-22. Staff are familiar with emergency procedures such as operation of fire extinguishers and procedures for severe storm warnings (where necessary).

H-23. Smoke alarms should be installed according to current codes.

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I. Nutrition and Food Service

GOAL: The nutritional needs of children and adults are met in a manner that promotes physical, social, emotional, and cognitive development.

RATIONALE: Children must be provided with adequate nutrition and also must be educated concerning good eating habits.

- I-1. Meals and/or snacks are planned to meet the child's nutritional requirements as recommended by the Child Care Food Program of the United States Department of Agriculture in proportion to the amount of time the child is in the program each day. Since infants and toddlers require smaller amounts of food served more frequently and school-age children require much more food than preschoolers the amount of food served is adjusted according to the age of the children.
- I-1a. For programs that use the school lunch program operated by the local school district, menus for snacks and meals are adjusted to meet the needs of infants, toddlers, and preschoolers.
- I-2. Menu information is provided to parents. Feeding times and food consumption information is provided to parents of infants and toddlers at the end of each day.

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food service. Food may be prepared at an

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program in appropriate sanitary

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J. Evaluation

GOAL: Systematic assessment of the effectiveness of the program in meeting its goals for children, parents, and staff is conducted to ensure that good quality care and education are provided and maintained.

RATIONALE: Ongoing and systematic evaluation is essential to improving and maintaining the quality of an early childhood education program. Evaluation efforts are based on program goals and assessment of needs, and identify both strengths and useknesses of program components.

- J-1. Program evaluation is a method of gathering information that can be used to strengthen programs to better meet the needs of children and families. Program evaluation should include all areas of the program, including family and community participation, development of the individualized learning plan, the physical facility, the learning environment, individualizing the curriculum, developmentally appropriate curriculum, administration, planning for transitions, and program evaluation.
- J-1a. All staff have received training on the evaluation process used within each program.
- J-1b. All staff are evaluated at least annually by the director or other appropriate supervisor.

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- ☐ Staff effectiveness through
- self-evaluation
- peer/supervisor evaluation
 - parent satisfaction
- staff satisfaction.
- ☐ Family-school partnership and parent satisfaction through
- accounts of parent participation
- reports of services needed and acquired by families
 assessment of parent satisfaction.
- ☐ Community participation through
- a report of the activities and accomplishments of the preschool advisory council
- ☐ Child outcomes and family expectations and satisfaction through
- parent satisfaction questionnaires
- evaluation of whether the goals of the individualized learning plan were met
 - visits with parents in home and community settings
- exit interviews with families when a child leaves the program

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J. Evaluation Continued

J-3. Individual descriptions of children's development are written and compiled as a basis for planning appropriate learning activities as a means of facilitating optimal development of each child and as records for use in communications with parents.

For example:

Means of assessing the program's effectiveness could include:

- case studies.
- video analysis.
- portfolio evaluation.

J-4. The program evaluation process:

- communicates the results of its evaluation to all those involved with the program.
- identifies areas where technical assistance or other resources could help strengthen the program.

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J. Evaluation Continued

J-5. The early childhood program uses evaluation results to:

- alter the strategic plan to better meet the needs of children and families.

develop a five-year plan for quality programming.

J-6. The program has developed a process to document the reasons if parents are not participating in the program, including whether or not there are such issues as:

- parent choice.
- lack of a telephone.
- lack of adequate notice.
 - need for child care.
- lack of transportation.

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